A case of retained fetal membranes in a broodmare
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A 14 year old broodmare was presented with purulent vaginal discharge and swelling in the limbs. The mare was bred 6 months earlier, but never confirmed pregnant. Initial physical examination showed a fever, injected mucous membranes, tachycardia, edema in all four limbs, a nonpregnant but enlarged uterus, and a developed udder. Abortion of a fetus was suspected. On vaginal examination, two large pieces of placenta were removed prior to a uterine lavage, but the remaining placenta nor fetus could be found.

The mare was treated for metritis and endotoxemia, a result of retained fetal membranes. Twice-daily uterine lavages with three gallons of a povidone iodine sodium chloride solution were performed. Medications included gentamicin (2,000mg IV q24), penicillin-G (6,000,000mg IM q12), flunixin meglumine (500mg IV q12), and oxytocin (20 IU IM). After the fourth day of treatment, the lavage effluent was clear and the lavages were reduced to once daily. A uterine infusion with gentamicin was also performed. This treatment was continued for two additional days before discharge from the hospital. The mare was continued on trimethoprim sulfamethoxazole and the owner was encouraged to have the mare examined for breeding soundness prior to breeding in the future.

This case is important to theriogenology because retained fetal membranes is the most common postpartum complication in mares. It is defined as the failure of partial or complete release of the allantochorion by 3 hours after parturition. Autolysis of the retained fetal membranes can lead to the development of metritis, endotoxemia, laminitis, and death. Treatment includes promoting uterine clearance, control of endotoxemia, and prevention of laminitis. This case shows successful treatment after a suspected abortion where the placenta and fetus were never found. Client education of the urgency of this condition is a significant component in early diagnosis and treatment of retained fetal membranes.

Keywords: Equine, retained fetal membranes, metritis, endotoxemia

References